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PTO/SB/17 (01/2003) Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**FEE TRANSMITTAL
for FY 2003**

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/774,267
Confirmation Number	5069
Filing Date	January 22, 2001
First Named Inventor	Ceulemans
Examiner Name	Gregory R. Del Cotto
Group/Art Unit	1751
Attorney Docket No.	CM1882

TOTAL AMOUNT OF PAYMENT (\$) 320.00**RECEIVED**
SEP 19 2003
TC 1700**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number **16-2480**Deposit Account Name **The Procter & Gamble Company**

- ☒
- Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17

FEE CALCULATION**1. BASIC FILING FEE – Large Entry**

Code (\$)	Fee Description	Fee Paid
1001 750	Utility filing fee	<input type="checkbox"/>
1002 330	Design filing fee	<input type="checkbox"/>
1004 750	Reissue filing fee	<input type="checkbox"/>
1005 160	Provisional filing fee	<input type="checkbox"/>

SUBTOTAL (1) (\$) ☐**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE – Large Entry**

	Extra Claims	Fee from Below	Fee Paid
Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x <input type="checkbox"/>	=	<input type="checkbox"/>

Independent Claims ☐ - 3** = ☐ x ☐Multiple Dependent ☐

** or number previously paid, if greater; For Reissues, see below

Code (\$)	Fee Description
1202 18	Claims in excess of 20
1201 84	Independent claims in excess of 3
1203 280	Multiple dependent claim, if not paid
1204 84	**Reissue independent claims over original patent
1205 18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$) ☐**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Code (\$)	Fee Description	Fee Paid
1051 130	Surcharge-late filing fee or oath	<input type="checkbox"/>
1052 50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
1053 130	Non-English specification	<input type="checkbox"/>
1812 2,520	For filing a request for ex parte reexamination	<input type="checkbox"/>
1804 920*	Requesting publication of SIR prior to Examiner's action <input type="checkbox"/>	<input type="checkbox"/>
1805 1,840*	Requesting publication of SIR after Examiner's action <input type="checkbox"/>	<input type="checkbox"/>
1251 110	Extension for reply within 1 st month	<input type="checkbox"/>
1252 410	Extension for reply within 2 nd month	<input type="checkbox"/>
1253 930	Extension for reply within 3 rd month	<input type="checkbox"/>
1254 1,450	Extension for reply within 4 th month	<input type="checkbox"/>
1255 1,970	Extension for reply within 5 th month	<input type="checkbox"/>
1401 320	Notice of Appeal	<input type="checkbox"/>
1402 320	Filing a brief in support of an appeal	<input checked="" type="checkbox"/>
1403 280	Request for oral hearing	<input type="checkbox"/>
1451 1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452 110	Petition to revive - unavoidable	<input type="checkbox"/>
1453 1,300	Petition to revive - unintentional	<input type="checkbox"/>
1501 1,300	Utility issue fee (or reissue)	<input type="checkbox"/>
1502 470	Design issue fee	<input type="checkbox"/>
1460 130	Petitions to the Commissioner	<input type="checkbox"/>
1807 50	Petitions related to provisional applications (37 C.F.R. 1.17(g))	<input type="checkbox"/>
1806 180	Submission of Information Disclosure Statement	<input type="checkbox"/>
1809 750	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
1810 750	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>
1801 750	Request for Continued Examination (RCE)	<input type="checkbox"/>
1802 900	Request for expedited examination of a design application	<input type="checkbox"/>
1454 1300	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>
	Other fee (specify) _____	<input type="checkbox"/>
	Other fee (specify) _____	<input type="checkbox"/>

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 320**RECEIVED**
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TC 1700**RECEIVED**
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TC 1700**SUBMITTED BY**Name (Print/Type) **Mark A. Charles**
Signature *Mark A. Charles*Registration No. **51,547****Complete (if applicable)**Telephone (513) 627-4229
Date September 3, 2003

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